

GWS 1-01 – Introduction and Scope

Att 1 Partial Exemption Process, Exhibit B

Rev. 1, 5/18/05

EFFECTIVE UPON ISSUE

Exhibit B
Request for Partial Exemption

Div:	Technical Point of Contact:	Phone:			Fax:		
Group:		TA:		Bldg:		Room:	
Describe the specific welding activity and application for which the exemption is being requested: (Exemptions may be granted for specific activities and applications, not welding processes or general use)							
Describe specific Reason/Justification for Requested Exemption: (Program requirements for Welding Checklist, filler material control [see GWS 1-03], and basic qualified welders [see GWS 1-05] are still required)							
Requestor's Name:		Signature:		Z#:	Phone:	Date:	
Approved by WPA*:		Signature:		Z#:	Phone:	Date:	
				Exemption Expires*:			
Re-Approved by WPA:		Signature:		Z#:	Phone:	Date:	

*If approved, approval will be granted for one year at which time it must be resubmitted to the WPA.